SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:					PAGE	2	20 OF	:	26
	(che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Mylan Inc. Political Action Committee (MYPAC) Full Name (Last, First, Middle Initial) DAVID A THOMPSON Date of Receipt Mailing Address 8 CARDINAL CIRCLE 30 2016 City Zip Code State Transaction ID: PR575673748608 SAINT ALBANS VT 05478-2159 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation SITE FINANCE LEAD Mylan Technologies, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 240.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** ROBERT S TIGHE Date of Receipt Mailing Address 3 MIRAMICHI TRAIL 30 06 2016 City State Zip Code Transaction ID: PR575674248608 **MORGANTOWN** WV 26508-2928 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation Mylan Pharmaceuticals Inc. Head of MPI and Mylan Canada Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) Other (specify) 240.00 Full Name (Last, First, Middle Initial) c. DAVID J WARGO Date of Receipt Mailing Address 315 PARKSIDE AVE 30 2016 State Zip Code Transaction ID: PR575678748608 PΑ **PITTSBURGH** 15228-2407 Amount of Each Receipt this Period FEC ID number of contributing С 40.00 federal political committee. Memo Item Name of Employer Occupation Head of Global OSD Technical Services Mylan Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 240.00 Other (specify)

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SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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